LOFTUS URBAN DISTRICT.

NORTH RIDING (GUISBOROUGH) COMBINED DISTRICTS.

. REPORT. for the Year 1937 of the Medical Officer of Health, C. R. GIBSON, M.A., M.B., CH.B,

D.P.H.

Guisborough:
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1938.



To the Chairman and Members

OF THE

LOFTUS URBAN DISTRICT COUNCIL.

Gentlemen.

I beg to submit my Annual Report for the year 1937, the contents and arrangement of which are in accordance with the Ministry of Health circular 1650.

Summaries of the vital statistics for the year will be found on page 5 and in the table on page 21. The birth-rate, death-rate, and infant mortality rate, all show increases over the figures for 1936. The birth-rate was 14.4, which is slightly below the birthrate (14.9) throughout the whole country. The death-rate was 13.5, as compared with a death-rate in England and Wales of 12.4. The district is estimated to contain a greater proportion than average of persons at younger ages, when death should be less likely, so that if an allowance is made for this the comparison is still more unfavourable to the district. However, the population of the district is estimated to have declined fairly steadily since the last census and the birth-rate has been for some years under the average for the whole country, so that it may be now that there is some excess of older people rather than younger in the district. As regards the infant mortality rate, however, there can be no doubt: at a rate corresponding to 136 infant deaths per thousand births in the district during the year, it is unmistakeably unsatisfactory. This was the average local figure at the beginning of this century, and gradually fell until in the five years 1924 to 1928 the average figure was only 55, at that time below the rate for England and Wales. The national rate has however continued more or less steadily to decline, and for 1917 was 58, while the local rate has tended, since those five years, to increase, and this year is the highest it has been since 1917.

More rapid progress has been made during the year towards the provision of houses to replace those condemned and to re-house overcrowded householders, and it seems likely that the current year will see their erection.

I am, gentlemen,

Your obedient servant,

C. R. GIBSON,

Guisborough, 17th May, 1938. Medical Officer of Health.

1. PUBLIC HEALTH OFFICERS.

Saltburn and Skelton & Brotton Warske-by-the-Sea Urban District			Mr. T. Young* Mr. R. Barry	Mr. J. R. Hall
Guisborough Loftus Sall Urban District. Urban District. Urba	Dr. C. R. Gibson.	Dr. C. R. Gibson.	Mr. E. Hollis Mr. C. Hollis Mr. 7	Mr. F. A. Russell — Mr. C
Borough of Guisb Redcar, Urban			Mr. W. Tutin R. H. F.	Mr. N. Hudson
	A. Whole-time Officers. Medical Officer of Health	Medical Officer to Joint Isolation Hospital	Sanitary Inspectors	Assis't Sanitary Inspectors

*Also Surveyor for the district concerned.

Statistics and Social Conditions of the Area.

Area (in acres) 10,595.

Registrar-General's estimate of resident population, 1937: 7,620.

Number of inhabited houses (end of 1937) according to Rate Books: 2.036.

Rateable value: .£24,209.

Sum represented by a penny rate: £91.

The main industries are iron and steel works and agriculture.

Extracts from Vital Statistics of 1937.

	Lxtrac	ts from v	/ II al \	Statistic	<u>US 01 1997.</u>
Live births	, legitimate illegitimate	Total 108 2	M. 48 1	F, 60 1	Birth Rate 14:4,
Still-births	• • • • • • • • • • • • • • • • • • • •	6	3	3:	Rate per 1,000 total births, 52.
Deaths		103	54	49:	Death-rate 13.5.
Deaths in	consequence of c	hild-birth:	D	eaths.	Rate per 1,000 total births.
	(a) from se	psis	• • •	0	()
	(b) from ot	her causes		0	()
	(c) total	***		()	0
Death-rate	of infants under	r one year o	f age:		
	All infants,	per 1,000 liv	e births		136
	Legitimate i	nfants, per 1	,000 leg	gitimate li	ive births 139
	Illegitimate	infants, per	1,000 il	legitimate	e live births nil
Death fro	n Measles (all a	ges)		()	
* * * * * * * * * * * * * * * * * * * *	Whooping Co	ugh (all age:	s)	2	
21 29	Diphtheria (a	II ages)		1	
,, ,,	Diarrhoea (ur	ider two yea	ers of ag	ge) 1	
49 39	Influenza (all	ages)		4	
9 ⁶ 9 7	Pneumonia (a	II ages)		4	
,,	Tubercuiosis	(all ages)		2	
11 19	Cancer (all ag	(es)		6	
,, ,,	Heart disease	(all ages)		31	

General Provision of Health Services in the Area.

There have been no developments or changes in the services provided in the area. Ambulance facilities for non-infectious cases are provided by the St. John Ambulance Association and are adequate for the ordinary needs of the district.

Sanitary Circumstances of the Area.

Water. There have been no new sources of public water supply installed, the quantity having been satisfactory during the year except at North Terrace, Loftus. I referred to this locality last year and am pleased to be able to report now that during the latter months of 1937 the supply was constant, and I trust this improvement will be continued and that there will be no further need to complain to the Cleveland Water Company.

Samples of water are submitted for bacteriological examination when suspicion arises of any lack of safety, but it has not been the practice to submit samples periodically in the absence of such indication. Besides the Cleveland Water Company's system there are four other piped supplies in the district and it is advisable that all of these should occasionally be subjected to bacteriological analysis, even though no complaint be received regarding the appearance, taste or smell of the water. During the year four samples were submitted from the Cleveland Water Company's supply, two from the Easington supply and one from the Boulby supply. Reports on these are summarised in the following table. As regards the samples from the biggest piped supply in the district it will be noted that the July samples show an improvement in bacterial purity over those taken in April.

BACTERIOLOGICAL EXAMINATION OF WATER, 1937.

6th Dec.	Boulby Grange.	Boulby Estate.	12,000	Present in one tenth c.c.		Present in 100 c.c.	Grossly polluted and quite unfit.
29th Sept.	Easington.	Estate.	680 220	Present in 10 c.c.	Present in 40 c.c.	Absent in 250 c.c.	Polluted and unsafe.
19th May	Easington.	Easington	870 220	Present in 10 c.c.	Present in 10 c.c.	Present in 250 c.c.	Polluted and unsafe.
23rd July	Railway Terrace. Loftus.		312	Absent in 100 c.c.	Absent in 100 c.c.	Absent in 250 c.c.	Good water: safe.
23rd July	Stone Row, Skinningrove.	ter Company.	222 86	Absent in 100 c.c.	Absent in 100 c.c.	Absent in 250 c.c.	Good water: safe.
31st March	Railway Terrace, Loftus.	Cleveland Water	290 98	Present in 100 c.c.	Absent in 100 c.c.	Absent in 250 c.c.	Safe,
31st March	Scarborough Street, Loftus.		470	Present in 20 c.c.	Present in 50 c.c.	Absent in 250 c.c.	not satisfactory.
Date and place	Sample taken	Supply	Bacteria per c.c. On Agar in 3 days at 200 c. in 2 days at 370 c.	B. Coli.	Streptococci	B. Enteritidis Sporogenes	Bacteriologist's opinion

A complaint was received regarding the Easington supply, which led to the submission of the sample in May. On receipt of this the Estate was notified of the result and requested to secure the purity of the water: they replied with a chemical report on a sample taken in July to the effect that the water was pure and wholesome. This supply is largely from shallow springs in agricultural land and it is obvious that its characters vary with weather and that evidence of occasional contamination is almost as important as constant bad reports. Although at times samples of this water may reach a moderate standard of purity I would regard it as unsafe until adequate steps are taken to prevent any surface drainage percolating into the supply. This supply has been well known to be unsatisfactory for many years.

The last report is on a sample of water from Boulby supply. As an illustration of the uselessness of reliance on lack of complaint as evidence of the purity of any water, I was assured by the consumer at the time of taking the sample that it was a good water. The first steps of his investigation revealed to the analyst such extreme contamination that he at once reported to that effect by telephone, whereupon notices were immediately posted warning consumers that the water was dangerous and should be boiled before use. Copy of the full analysis was sent to the Estate with a request to take immediate steps to bring the supply to a safe condition. The chemical analysis of this water was as follows:—

(Chemical results in parts per 100,000).

Appearance: Brownish opalescence and brown deposit of vegetable and mineral debris.

Colour: Brown. Odour: Earthy.

Reaction, p.h.: Neutral, 6.9. Free Carbonic Acid: 1.0,

Electric Conductivity at 20°C.: 520.

Total Solids, 180°C.: 35 0. Chlorine in Chlorides: 6.0. Nitrogen in Nitrates: 0.44.

Nitrites: trace.

Hardness: Permanent 14:5.

Temporary 2.0.

Metals: Iron 0.06.

Iron in Solution 0.010.

Free Ammonia: 0.1150.

Albuminoid Ammonia: 0.0650.

Oxygen absorbed in 4 hours at 80°F.: 0.840.

Drainage and Sewerage: The sewers were extended by the laying of 415 yards of 9-inch stoneware sewer to serve the Council's proposed housing scheme.

Agreement was reached with the Whitby Rural District Council for permission to use their proposed sewer outfall at Staithes for a payment of £200 towards the cost of the works.

Rivers and Streams: Complaint was made of discharge of hot tarry water on to the foreshore at Skinningrove, and notice was served under Sec. 4 of the Rivers Pollution Prevention Act, 1876.

Closet Accommodation: 137 pail-closets and 2 privies were converted voluntarily to water-closets during the year, the number of closets of each type remaining at the end of theyear being

Privies ... 343 Pail-closets ... 782 Water-closets ... 756

An Inquiry was held by the Ministry of Health on the request of the Council for permission to borrow £2,400 for the conversion of 210 privies and 182 pail-closets under the Public Health Acts (Amendment) Act, 1907. The Minister's decision was that he was satisfied as to the necessity of the proposed works but that the notices served were now invalidated by the repeal of the 1907 Act, and it would be necessary for the Council to serve fresh notices under Sec. 47 of the Public Health Act, 1936.

The Council decided that, as a general principle, under Sec. 47 of the Public Health Act. 1936, they would serve notice on the owner to grant permission to the Council to do the work contemplated rather than serve notice for the owner to do the work himself.

Public Cleansing: This has been re-organised by the introduction of mechanical transport in the place of three horses and carts.

The scavenging of Easington, previously let by contract, is now undertaken by direct labour.

Sanitary Inspection of the Area: The report furnished by the Sanitary Inspector is given in Table 5.

Port Sanitary Report: The following information concerning the character and amount of shipping and trade at the Skinningrove Jetty has been kindly supplied by the Skinningrove Iron Co.

I.—Amount of Shipping entering the Port during the year.

	Normalis and	413	Number I By the Medical	Inspected. By the	Number	Number of vessels reported as having, or
(1)	Number	Tonnage	Officer of Health	Sanitary Inspector	reported to be Defective	having had during the voyage infectious disease on board
Total Foreign					-	-
Coastwise (Steamers)	10	8,862		-		and a great and a second

II.—Character of Trade of Port.

- (a) Passenger Traffic during the year: nil.
- (b) Cargo Traffic: Imports: nil.

Principal Exports: pig iron, basic slag, and steel scrap.

(c) Foreign Ports from which vessels arrive: nil.

III.—Source of Water Supply.

Water is obtained from the Cleveland Water Co.

IV.—Port Sanitary Regulations, 1933.

No Declarations of Health have been received, as there have been no ships arriving from foreign ports.

No notifications have been received of inward vessels requiring special attention.

The question of mooring stations was discussed with the Customs Officer some years ago, and his advice was that no safe mooring station was available in the area.

No arrangements have been made for premises for medical examination, cleansing and disinfection of ships, etc., premises for the temporary accommodation of persons, hospital accommodation for plague, cholera, or yellow fever, or for ambulance transport other than that available for the other needs of the district.

Table C.

Cases of Infectious Disease landed from vessels: nil.

Table D.

Cases of infectious Sickness occurring on vessels during the voyage but disposed of prior to arrival: nil.

V.-Measures against Rodents.

Nil.

VI. Hygiene of Crews' Spaces.

No nuisances reported.

VII.—Food Inspection.

No action has been required.

Shops: No action taken under the Shops Act, 1934, with respect to ventilation and and temperature; as regards sanitary conveniences, the provision of this was obtained for one shop.

Smoke Abatement: No action taken.

Swimming Baths and Pools: There are no swimming baths or pools open to the public in the area, but the sea at Skinningrove, where there is a good sandy beach, is used to some extent.

Eradication of Bed Bugs: One house (not owned by the Council) was found infested with bed bugs and was fumigated by Furmex Candles, the work being done by the Sanitary department of the Council.

Schools: No School Closure was recommended during the year.

Housing.

A tabulated statement of housing inspections and action taken is given in the Appendix, page 19.

Last year I reported that a Housing Site had been obtained by the Council and a lay-out approved. Progress this year has been the final approval by the Ministry of plans submitted for the different types of houses proposed, and tenders for 70 houses are now accepted. Most of the houses the subject of Clearance or Demolition Orders in 1936 are still in occupation and their condition has deteriorated. In December I reported to you on the condition of Boulby Iron Cottages, that they were subject to driving rain coming through the roofs and round the window frames: it appeared also that some of these cottages had changed tenancy since the clearing order was made.

Inspection and Supervision of Food.

Milk Supply: Forty-three inspections of Cowsheds and Dairies were made by your Sanitary Inspector and one sample of milk was taken and submitted for bacteriological analysis, on complaint from another district of unsatisfactory report on the milk when sampled at a retailer there. Taken at the farm the milk gave a bacterial count of 19,300 and coliform bacilli absent in one hundredth c.c. in each of three tubes. Twelve informal notices, to cleanse, were served and complied with.

According to information received from the County Medical Officer of Health there would appear to be two licensed producers of Accredited Milk in the area in 1937.

Meat: Regular inspection of slaughterhouses and of carcases is made but there is no ante-mortem inspection of animals. The results of the inspection of carcases is given in the following table:—

Meat-Carcases Inspected and Condemned.

Cat	tle, including			
	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known)	—		4 5746	
Number inspected	578	28	470	531
All diseases except Tuberculosis.				
Whole carcases condemned	-		_	1
Carcases of which some part or organ was condemned		-		2
Percentage of number inspected affected with disease other than				
Tuberculosis	•		_	0.56
Tuberculosis only: Whole carcases condemned	. 1		_=	
Carcases of which some part or organ was condemned	. 32		_	2
Percentage of the number affected with Tuberculosis	5.7			0.37

Other Foods. No action was taken under the Food & Drugs Act, or other enactments dealing with adulteration.

Shell-fish (Molluscan). Periwinkles are found on the rocks at Cowbar and Skinningrove. No shell-fish are marketed in the district but it appears now that winkles have been collected near Cowbar and sent for sale to a county borough a few miles away. The safety of winkles from this laying is at present being investigated.

Prevalence of, and Control over, Infectious and other Diseases.

Scarlet fever was more prevalent in the district than usual, with 55 notified cases, compared with 33 in the preceding year, and an average of 23 in the five years before that. Viewing the incidence of scarlet fever in the Combined Districts as a whole, from the beginning of regular notification in 1893, there is visible, apart from the epidemic ups and downs covering five years or less, a regular fall in the trend of the curve down to a minimum about 1916, followed by a reversal of the change to a rise of similar proportions, still in operation. In 1916 there were, in the whole of the Combined Districts, only 48 notified cases of scarlet fever: in 1894, which was a year of lower prevalence between years of higher prevalence, there were 274 cases. That was 22 years before 1916, and similarly, 19 years after 1916, there were in 1935, also a year of low prevalence, 210 cases. The local history of the disease suggests a slow regular variation in its prevalence, underlying the rapid changes from year to year, and repeating itself after a period of not less than 50 years, possibly rather more than 100 years. The minimum, about 1916, is already some twenty years behind us: there is no sign at present of the maximum having been reached.

There is then a possibility that for some years the number of cases of scarlet fever may remain at a comparatively high level. But, notwithstanding the greater prevalence of the disease in the last twenty years, there have been fewer deaths from it, so that it is now less harmful than measles or whooping-cough.

Scarlet Fever: Deaths and
Fatality Rate (Number of deaths per thousand cases notified).

	North	Riding (Guisborough)	Combined Districts.	England & Wales.
		Number of Deaths.	Fatality Rate.	Fatality Rate.
1905—09		8	9.8	')
1910-14		31	25.9	?
191519		5	9.9	17.8
1920 - 24		6	8.5	11.2
1925—29		6	8:5	7.4
193034		3	2.7	6.3
1935—37		()	0 0	4.8
(3 years)				(1935 & 1936 only).

In the last five years there have been, in the Combined Districts, 1,376 cases of the disease and one death, so that the fatality rate over that period has been 0.7 per thousand, less than one tenth of what it was in 1925-29.

The proportion of cases removed to isolation hospital has almost steadily increased. In 1915-19 only 25%, of the patients were isolated out of their own homes and yet in one of these years there were no more than 48 cases in the whole area of the Combined Districts. Since then the proportion of cases removed to hospital has increased until now it averages 77%, over all the districts, while the total number of cases has grown as regularly. It is not that removal to hospital with subsequent return of the patient home on discharge has itself had any effect in increasing the prevalence of the disease, but it would appear to have done nothing to prevent it. One cannot say that removal to hospital in scarlet fever is useless as a public health measure, for it has doubtless had some effect in bringing about the great reduction in the fatality of the disease, and although the years of low prevalence again are much the same as they were in the 'nineties, the years of higher prevalence now do not reach such large figures. The explanation of the inadequacy of isolation in the wiping out of scarlet fever has come to light in the last few years; it appears that the same germ which in one person will cause an attack of scarlet fever, in another will cause tonsillitis only, or in a third, symptoms not particularly different from a cold in the head, or in a fourth, a local infection at some other part of the body, and these cases, not searlet fever but caused by and carrying the same germ, since they are not isolated, spread their infection to other persons, some of whom develope typical scarlet fever. The logical alternatives would appear to be, either to give up removal to hospital of patients with scarlet fever, with the exception of the more serious cases that cannot receive at home the care they need, or to isolate strictly, and preferably in hospital, not only all cases of scarlet fever but also all those cases of tonsillitis, colds, etc., due to the same germ. The latter course is impracticable as many of these attacks are too mild to be brought to medical notice, definite diagnosis of the causal organism cannot be made without a delay of several days for bacteriological investigation, hospitals and staffs would require to be enlarged, and the cost would be out of proportion to the benefit likely to accrue.

The percentage of cases of scarlet fever removed to hospital in each of the districts last year and in the last five years has been as follows:--

	Redear	Guisborough	Loftus	S.dtburn &	Skelton &
	Borough.	U.D.	U.D.	Marske U.D.	Brotton U.D.
1937	 70%	78°	96.,	56	88%
1933—37	 7.10.,	74%	89%	66	82 %

The principle governing admission to hospital of scarlet fever cases which is at present adopted in the district is that, if the patient can be properly isolated and treated at home, he should remain there, and proper isolation is held possible if there is someone to attend to the patient who is herself protected by a previous attack of fever and if it is easy to avoid contact of unprotected children with the patient. Doubtless some cases that could be with advantage isolated and treated at home have been removed to hospital because perhaps the parents thought the child would make a better recovery there, but it is certain that the ordinary mild attack of scarlet fever should be recovered from quicker and with less risk of complications if treated alone at home rather than in association with others in a hospital ward.

Seven cases of diphtheria were notified, compared with 20 in 1936 and an average of 4 cases annually in the five years before that. Six were removed to hospital, one dying the same day. It is a matter for regret that more parents have not availed themselves of the facilities for obtaining free protection of their children against diphtheria by immunisation.

In the previous year there had been a few cases of paratyphoid fever in the district; none were reported during 1937.

Influenza was very prevalent in January and seriously affected the attendance at some of the schools: most cases were mild. There was a small epidemic of whooping cough in the late spring and of measles in the autumn, with a large number of cases of chickenpox over a great part of the year, but influenza was the only epidemic disease of any seriousness.

School intimations of absences on account of infectious disease are regularly received and are the only sources of information as to the presence of non-notifiable infectious disease and also useful in checking the completeness of the records of notifiable disease.

The number of patients admitted to the Joint Isolation Hospital from this and other districts is given in the following table for the twelve months ended March 31st, 1938, the figures in brackets being the admissions in the previous twelve months.

Joint Isolation Hospital.

Patients admitted April 1st, 1937, to March 31st, 1938.

		Redcar Borough.	Guisborough U.D.	Loftus U.D.	Saltburn & Marske U.D.	Skelton & Brotton U.D.	Total.
Scarlet Fever		73 (121)	22 (15)	57 (29)	25 (10)	50 (45)	227 (220)
Diphtheria		8 (3)	2 (1)	11 (18)	1 (5)	10 (4)	32 (30)
Enteric Fever		*2 (1)	— (19)	(4)	— (1)	2 (18)	*4 (44)
Puerperal Feve	r	2 (2)	The Section of	 (1)	1 ()	(2)	3 (5)
		85 (129)	24 (35)	68 (52)	27 (16)	62 (69)	226 (301)

^{*} Includes one case in which diagnosis was altered to appendicitis.

Nine new cases of tuberculosis were notified during the year, and there were two deaths from this disease, both of them occurring in hospitals outside the district.

No action was taken under Section 62 of the Public Health Act, 1925: no tuberculous person employed in the milk trade was discovered, and no action was required under the Public Health (Prevention of Tuberculosis) Regulations, 1925.

No action has been taken under Section 16 of the Public Health Act, 1925, for the prevention of blindness or for the treatment of persons suffering from any disease or injury to the eyes.

APPENDIX.

3. NOTIFIABLE DISEASES (other than Tuberculosis), 1937.

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Smallpox	Scarlet Fever	Diphtheria	Puerperal Pyrexia	Pneumonia	Erysipelas	Ophthalmia. Neon.			
			3ver 3 2 3 4 3 4 5 5 5 6 2 3 1 2 1 2 1 2 3 -	a 7 — — — — — — — — — — — — — — — —	3ver - <td>a 55 6 2 3 2 14 3 1 3 2 - 53 - 53 - 53 - 18 Pyrexia 12 - 1 6 S 6 1 1 2 1 4 3 1 3 2 - 53 - 53 1 3 1</td> <td>a — — — — — — — — — — — — — — — — —</td> <td>a 55 — 6 2 3 2 14 3 1 3 2 — 53 — 6 Pyrexia 12 — 1 2 1 2 1 4 — 6 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9</td> <td>a 55 6 2 3 2 14 3 1 3 2 53 - 53 - 53 - 53 - 53 - 53 - 6 5 2 3 2 14 3 1 3 2 - 53 - 53 - 53 - 53 - 53 - 54 - 54 - 54</td>	a 55 6 2 3 2 14 3 1 3 2 - 53 - 53 - 53 - 18 Pyrexia 12 - 1 6 S 6 1 1 2 1 4 3 1 3 2 - 53 - 53 1 3 1	a — — — — — — — — — — — — — — — — —	a 55 — 6 2 3 2 14 3 1 3 2 — 53 — 6 Pyrexia 12 — 1 2 1 2 1 4 — 6 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	a 55 6 2 3 2 14 3 1 3 2 53 - 53 - 53 - 53 - 53 - 53 - 6 5 2 3 2 14 3 1 3 2 - 53 - 53 - 53 - 53 - 53 - 54 - 54 - 54

4. TUBERCULOSIS.

	Non Pulmonary	<u></u>	1		1			-		1		l	-	61
Deaths.	Non P	M.	I	1		1	1	-	1	-	1	1	-	
Dc	Pulmonary	<u> </u>	-	1	ļ	-	1	1		I		I	1	
	mlnd	M.	-	1	P									
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ases.	Non-Pulmonary	M.					1	<u></u>	ı	_	1	_	1	က
New Cases.	nary.	<u>F</u> *	1		1	1		-		Ţ		1		ಣ
	Pulmonary.	M.	ı	1	1		1	1			-	!	1	
			:	*	*	:	:	:	:	•	:	:	x	
	Age Periods.		Under 1 year	1—4 years	5—9 years	10-14 years	15—19 years	20—24 years	25—34 years	35—44 years	45 – 54 years	55—64 years	65 years and upwards	All Ages

5. ABSTRACT OF THE WORK OF THE SANITARY DEPARTMENT.

Remarks					Fish frying		1	ļ	
Result	Compliance (except 5 incomplete)	Compliance	Compliance	Compliance	C/ Image	Compliance		1	
Statutory Notices	IC	ΞZ.	= Z	7.	= Z	= Z.	= 7.	:= Z	
Informal Notices	492	20	12	9		formed)]	
Number dealt with	507	9	70	+	8	1	1	્રેંડ	
	Nuisances	Slaughterhouses	Dairies and Cowsheds	Factories and Workshops	Offensive Trades	Common Lodging House	Music Halls, etc.	Premises disinfected	

6. LABORATORY EXAMINATIONS.

Total.	117	26	140	32	25	30	8	16	12	
Skelton and Brotton Urban District.	15	ਜਾ	36	15	32	×	7		ಣ	Yes
bun mudiln8 no8-yd-oilendi tointei(Linda')	=	က	1	2	61	1	1		_	Yes
suffort nrdaU foiatsi(I	8	ਜ	23	~-f*	11	2		7	ಣ	Yes
flguorodsint) nadr!J trickiti —	25	9	28	60	61	17	1	-		Yes
Borough of Redear.	48	5,	39	∞	20	က	က	C1	ro.	Yes
	Sputa examined for Tubercle bacilli	Sputa found positive	Swabs from Diphtheria suspects examined	Sputa from Diphtheria suspects found positive	Swabs from Diphtheria convalescents examined	Swabs from Diphtheria contacts	Blood examined for Enteric group (Widal Test)	Faeces, for Enteric Group	Other examinations	Diphtheria Antitoxin issued by Local Authority

7. HOUSING STATISTICS.

Ne	w Ho	ouses erected in 1937 :	By private enterprise By the Urban District		• • •	• • •	7
			Total	* * *			7
Ι.	Inspe	ection of Dwelling-houses	during the year:				
	(1)	Public Health	dwelling-houses inspected for Housing Acts) tions made for the purpose		g defects (6	251 534
	(2)	(a) Number of dwell	ing-houses (included under and recorded under the Ho	sub-head (using Cons		gu-	114
			tions made for the purpose		• • •	* 1	332
	(3)	Number of dwelling	-houses found to be in a as to be unfit for human	state so	dangerous	()1'	Vil
	(4)		houses (exclusive of those) found to be not in all re			for	42
				• • •		• • •	4.5
2.		Number of defective	ear without service of formal no dwelling-houses rendered fi authority of their officers		uence of in	formal 	28
3.			ctions 9, 10 and 16, of the H ling-houses in respect of w			ved 	14
		(2) Number of dwellin	ng-houses rendered fit after	service of	formal notic	es:	
		(a) By owne (b) By local	ers anthority in default of owr	iers		• • •	8
	В.	Proceedings under Pr	ublic Health Acts:				
			ing-houses in respect of whats to be remedied	nich notice	s were ser		26
		service of for			emedied af	ter	
		(a) By owne (b) By local	rs authority in default of own	 iers		1	24
	C.	Proceedings under Se	ctions 11 and 13, of the Hou	using Act,	1936:		
			ling-houses in respect of w				Vil
		(2) Number of dwell	Fing-houses demolished in p	oursuance	of Demolit	ion	Vil
	1).	Proceedings under Se	ction 12, Housing Act, 1936	:			
			nte tenements or undergroog Orders were made	und rooms			Vi1
			ate tenements or undergrog Orders were determined endered fit	, the tene	s in respect ment or ro	of om	XiI

4.	Hous	sing Act, 1935. Overcrowding: —								
	(a)	(1) Number of dwelling-houses overcrowded at the end of the year	ur	41						
		(2) Number of families dwelling therein		54						
		(3) Number of persons dwelling therein		264						
	(<i>b</i>)	(b) Number of new cases of overcrowding reported during the year								
	(c)	(1) Number of cases of overcrowding relieved during the year		23						
		(2) Number of persons concerned in such cases		200						
	(d) Particulars of any cases in which dwelling-houses have again become									
		overcrowded after the Local Authority have taken steps f	or the							
		abatement of overcrowding		Nil						

8. SUMMARY OF VITAL STATISTICS.

	rate. per thousand births)	15.7 137	15.0 124	14.2 136	15.2 138	14.4 123	13.5	13:3 120	10.6	0.11	11.7 59	10.6	12.7 863	13.3 69	13.5 136
Vearly	Ente.	36.4	32.8	32.1	35.4	34.5	33.0	27.0	25.2	18.8	16.4	12.6	14.8	11.3	7.71
Deaths from all	forms of Tubercu- Iosis.	Million States		1	1	45	45	46	39	28	19	4	ıo	လ	2
at Ages.	1—4 years.	62	59	09	53	09	72	1	47	17	18	2	_	ıo	ব্য
Deaths at Ages.	Under 1 year.	161	126	135	159	161	172	141	93	43	38	4	10	9	15
	Deaths	505	465	440	496	547	009	576	481	458	461	85	100	103	103
	DECENS.	1172	1018	686	1150	1310	1465	1175	1148	872	648	101	116	87	110
	Population	6,453	6,208	6,200	6,508	7,600	8,872	8,700	9,120	8,342	7,897	8,010	7,861	7,734	7,620
District	reriod.	18841888	1889—1893	1854—1898	1899—1903	1904-1908	1909—1913	1914—1918	1919—1923	19241928	1929—1933	1934	1935	1936	1937

